

HOUSE JOINT RESOLUTION 1062
By Cooper B

A RESOLUTION to create a special joint committee to study the new delivery method of cardiopulmonary resuscitation (CPR).

WHEREAS, since the 1960s cardiopulmonary resuscitation, utilizing mouth-to-mouth resuscitation followed by chest compression, has been the standard practice in emergency medical response situations involving a person in cardiac arrest; and

WHEREAS, in 2000 this traditional response by emergency personnel was called into question by the City of Seattle, the national statistical leader in emergency response, when it was determined that more lives were saved by advising chest compressions alone; and

WHEREAS, Richmond, Virginia discovered that after 911 callers were told to apply chest compressions, arriving rescue personnel reported a tenfold increase in patients receiving the simplified treatments; and

WHEREAS, at a recent national meeting of emergency medical services directors from 21 of the nation's largest cities, doctors from New York, Los Angeles, and Chicago decided to make the switch along with Atlanta, Austin, Cleveland, El Paso, Fort Worth, New Orleans, San Antonio, and San Francisco to simplify 911 rescue instructions to increase cardiac arrest survival rates; and

WHEREAS, the City of Nashville will begin utilizing such new instructions by April 1, 2004, which apply primarily to untrained bystanders, the group most likely to reach victims in the first critical minutes where lives are saved or lost within six minutes; and

WHEREAS, the American Heart Association is reviewing research that suggests mouth-to-mouth resuscitation is ineffective in the first few minutes after a collapse and is also considering changes to guidelines that support mouth-to-mouth; a decision is due in 2005; and

WHEREAS, the treatment provided to the citizens of Tennessee in the time of a medical emergency is an issue of life and death and is of paramount importance; now, therefore,

BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES OF THE ONE HUNDRED THIRD GENERAL ASSEMBLY OF THE STATE OF TENNESSEE, THE SENATE CONCURRING, that a special joint committee consisting of three members of the House of Representatives and three members of the Senate be appointed by the Speakers of the respective chambers to conduct a study and review of the new delivery method of cardiopulmonary resuscitation (CPR) which utilizes chest compressions only for emergency care treatment of persons in cardiac arrest.

BE IT FURTHER RESOLVED, that all legislative members of the special joint committee shall remain members of such committee until the committee reports its findings and recommendations to the General Assembly and shall be paid as members of the General Assembly are paid for attending legislative meetings as provided in Tennessee Code Annotated, Section 3-1-106.

BE IT FURTHER RESOLVED, that the committee shall be convened by the member with the most years of continuous service in the General Assembly, and at its first meeting, shall elect a chair, vice chair, and other officers as the committee deems necessary.

BE IT FURTHER RESOLVED, that all appropriate agencies of state government shall provide assistance to the special committee upon request of the chair.

BE IT FURTHER RESOLVED, that the special joint committee shall timely report its findings and recommendations, including any proposed legislation, to the One Hundred Fourth General Assembly no later than February 1, 2005, at which time the committee shall cease to exist.